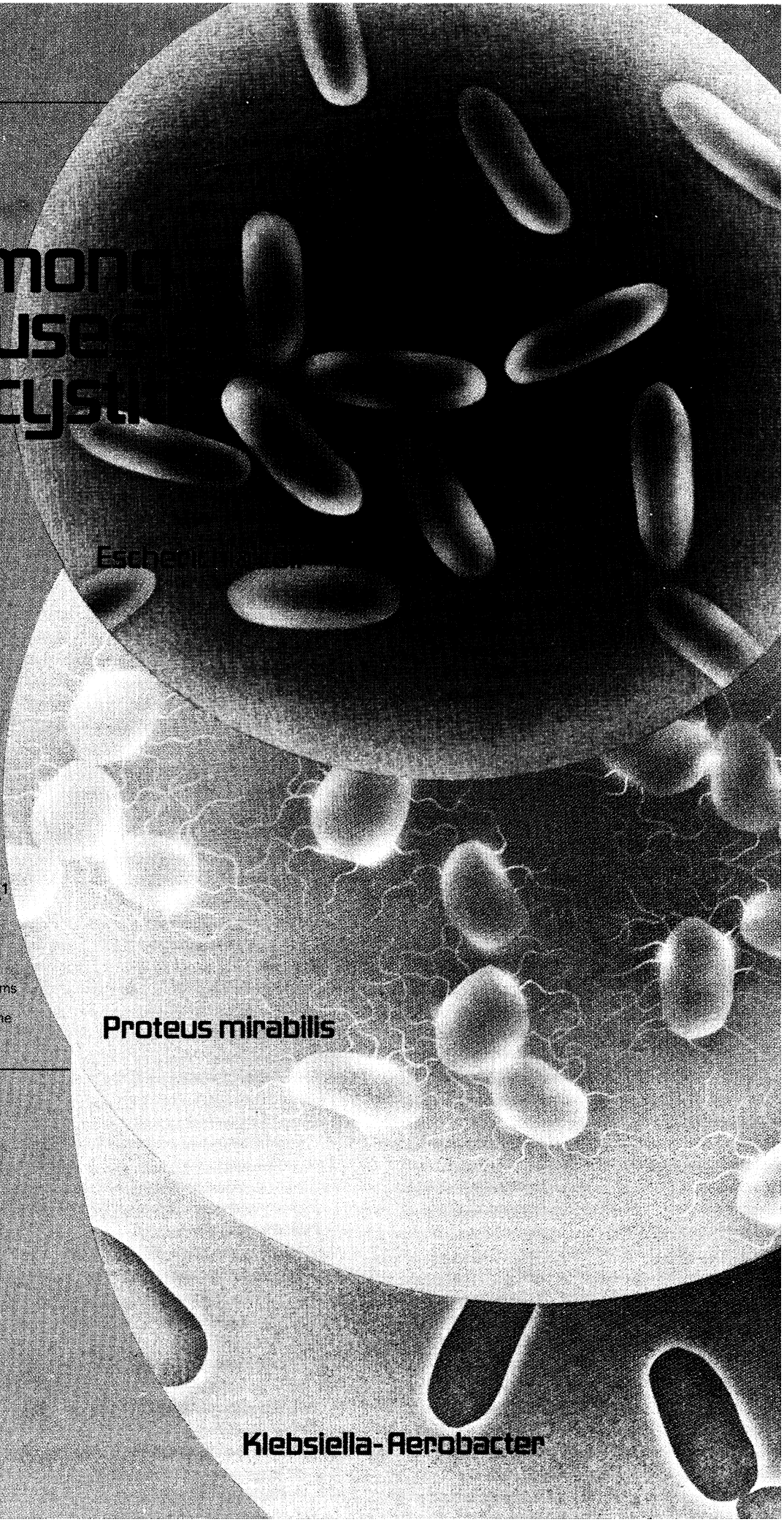
E. coli: first amon
the cause
acute cyst



Uncomplicated urinary tract infections, such as acute cystitis, are most frequently caused by serotypes of *E. coli* that are sensitive to the sulfonamides.[1]

References: 1. Johnson JE: Urinary tract infections, chap. 24, in *Clinical Concepts of Infectious Diseases*, edited by Cluff LE and Johnsen JE. Baltimore, The Williams & Wilkins Co., 1972, p. 273.
2. Data on file, Hoffmann-La Roche Inc., Nutley, New Jersey 07110.

ROCHE

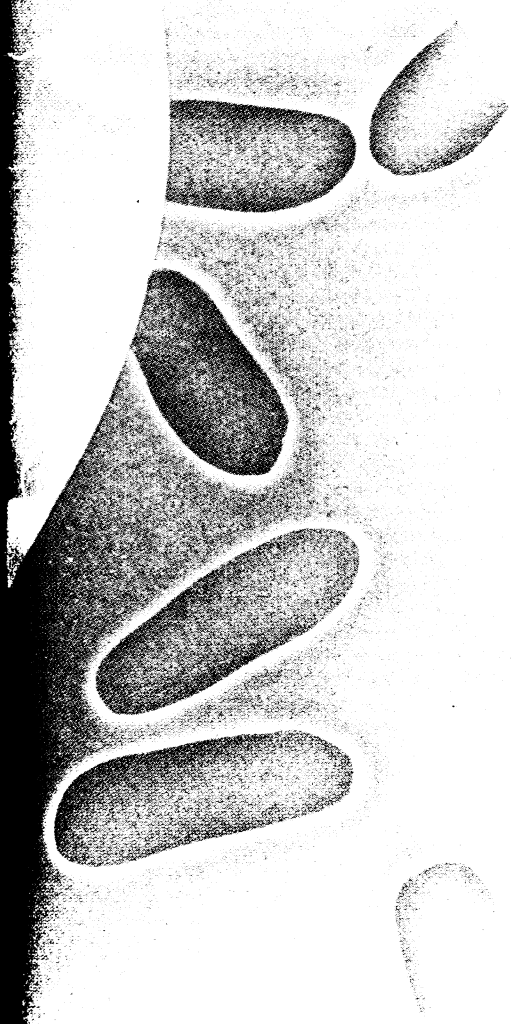
Gantanol® [sulfamethoxazole] effective first-line therapy for these important reasons

Efficacy You can initiate Gantanol therapy before urine-culture results are available from the laboratory, since Gantanol has demonstrated efficacy against the organisms that cause most urinary tract infections, including *E. coli*. In a clinical trial of 406 patients with acute, nonobstructed cystitis due to susceptible bacteria, 81% achieved totally clear (zero colony count/ml) urine cultures, while 88% achieved negative (<10,000/ml) cultures.[2]

Convenience The fewer the daily doses, the more likely the patient is to comply with the prescribed regimen. Gantanol DS adds the extra convenience of a single tablet to the *b.i.d.* convenience of Gantanol.

Economy Gantanol DS (Double Strength) tablets make Gantanol therapy even more economical for your patients.

Please note that Gantanol is contraindicated during pregnancy, the nursing period, and in infants under 2 months. During therapy, caution patients to maintain adequate fluid intake; perform frequent CBC's and urinalyses with careful microscopic examination.



sulfamethoxazole/Roche

4 tablets initially, then 2 tablets *b.i.d.*

Now with even greater convenience and economy

Double Strength Tablets

sulfamethoxazole/Roche

2 tablets initially, then only 1 tablet *b.i.d.*

Please see next page for a summary of product information.

EMPIRIN COMPOUND

Each tab
32 mg
mg (gr
(Warning

20 days to shape his world

Your diagnosis is firm: Primary Hypertension.

His future is in your hands now. The next 20 days are decisive.

What are the odds against that future? The sad fact is, half of America's hypertensives drop out of treatment.[1]

You can improve those odds. We can help you. Here's how:

1. COUNSEL. Talk to your patient about the disease and its consequences—about the problem of strokes, heart attacks, and kidney failure. Emphasize the need for taking the medication you've chosen, daily, and for the rest of your patient's life. Teach your patient about the drugs you prescribe—their effects and side effects. The more he knows, the more he'll be involved.

2. CATAPRES® (clonidine hydrochloride) because the data show that people stay with it. It has a high adherence rate.[2] There are good and substantial reasons why patients stay with Catapres—read them on the next pages.

Counsel...and Catapres. They can help change the odds against your patient's future. And to change them even more, ask us for these from your Boehringer representative:

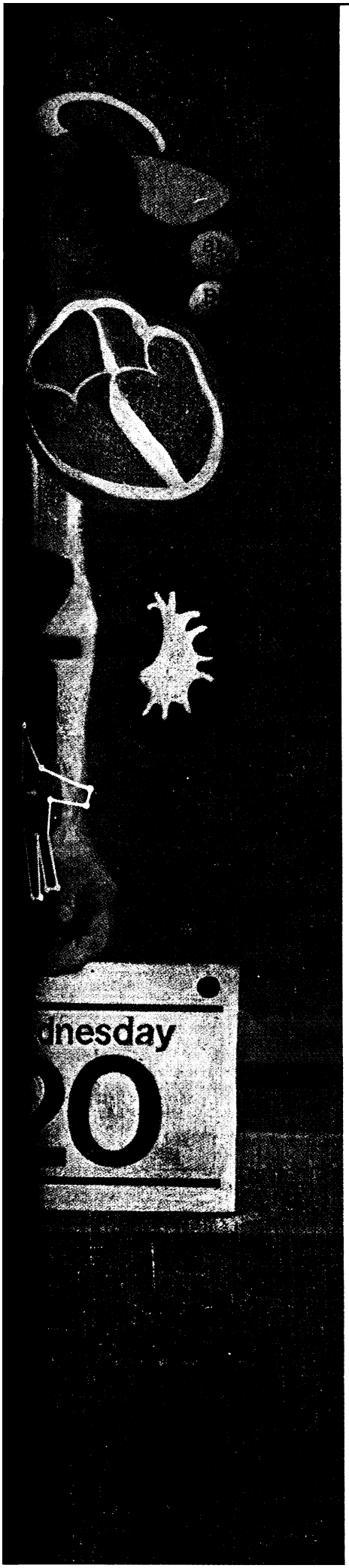
—A major new film on Methods of Compliance
—A useful and extensive monograph on compliance
—The Onesti paper
—Patient Aid Booklet
—Patient worksheets
—Patient Reminder Postcards
—Other effective compliance enhancers

*By repeated determinations of the basal blood pressure,** and once the medical history, physical examination, including funduscopic and routine laboratory tests,† have been completed, one is usually able to exclude secondary causes and to be reasonably comfortable with a diagnosis of primary or essential hypertension.

**The National Hypertension Program Study Committee, in September, 1972, recommended blood pressures exceeding 140/90 mm Hg be regarded as excessive for adult Americans under age 50. The World Health Committee ceiling has been 160/95 mm Hg.

†Hematocrit, urinalysis, creatinine (or urea nitrogen), triglycerides, cholesterol, uric acid, plasma glucose, serum potassium, electrocardiogram, and chest x-ray.

Please see brief summary of prescribing information on last page of advertisement for warnings, precautions, and adverse reactions.



Tablets of 0.1 and 0.2 mg

Catapres® (clonidine HCl) can help you shape his world

For most hypertensives, you need only two drugs... a diuretic and Catapres.

Start with either, depending on your judgment.

If you've come to expect only this much of Catapres...

1. smooth lowering of blood pressure
2. effective for all degrees of hypertension (mild to moderate in potency)
3. brain, heart, and kidney blood flow preserved

Ask for more of Catapres®

1. no contraindications
2. low incidence of depression and orthostatic hypotension
3. normal hemodynamics
4. no fatal hepatotoxicity
5. excellent record of compliance

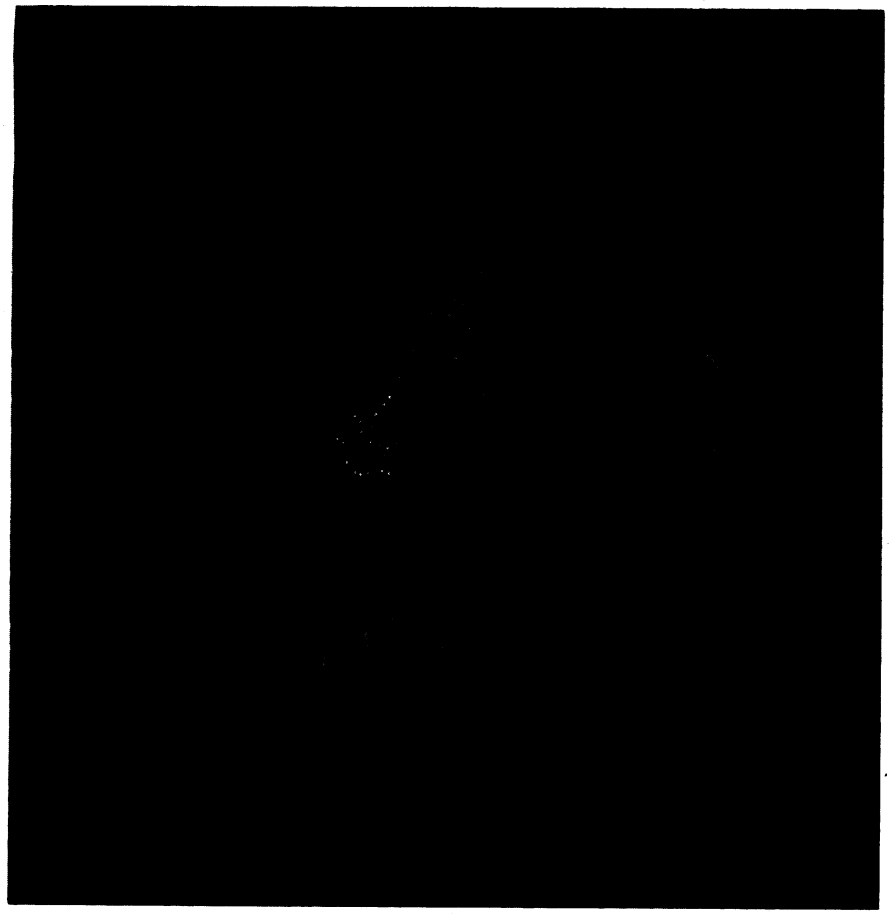
Most common side effects are dry mouth, drowsiness, and sedation, which generally tend to diminish with time.

Please see brief summary of prescribing information on last page of advertisement for warnings, precautions, and adverse reactions.

Tablets of 0.1 and 0.2 mg

Catapres®
(clonidine HCl)

It gives you more than you expect of Catapres



Tablets of 0.1 and 0.2 mg

Catapres® (clonidine HCl) can help you shape his world

Counsel...and Catapres. They can help change the odds against your patient's future. And to change them even more, ask us for these from your Boehringer representative:

—A major new film on Methods of Compliance
—A useful and extensive monograph on compliance
—The Onesti paper
—Patient Aid Booklet
—Patient worksheets
—Patient Reminder Postcards
—Other effective compliance enhancers

References:
1. Wilber JA, Barrow JS: Am J Med, *52*:653-663, 1972.
2. Data on file at Boehringer Ingelheim Ltd.

Boehringer Ingelheim

Boehringer Ingelheim Ltd.
Ridgefield, CT 06877

Catapres® brand of clonidine hydrochloride
Tablets of 0.1 mg and 0.2 mg

Indication: The drug is indicated in the treatment of hypertension. As an antihypertensive drug, Catapres (clonidine hydrochloride) is mild to moderate in potency. It may be employed in a general treatment program with a diuretic and/or other antihypertensive agents as needed for proper patient response.

Warnings: Tolerance may develop in some patients necessitating a reevaluation of therapy.
Usage in Pregnancy: In view of embryotoxic findings in animals, and since information on possible adverse effects in pregnant women is limited to uncontrolled clinical data, the drug is not recommended in women who are or may become pregnant unless the potential benefits outweigh the potential risk to mother and fetus.
Usage in Children: No clinical experience is available with the use of Catapres (clonidine hydrochloride) in children.

Precautions: When discontinuing Catapres (clonidine hydrochloride), reduce the dose gradually over 2 to 4 days to avoid a possible rapid rise in blood pressure and associated subjective symptoms such as nervousness, agitation, and headache. Patients should be instructed not to discontinue therapy without consulting their physician. Rare instances of hypertensive encephalopathy and death have been recorded after cessation of clonidine hydrochloride therapy. A causal relationship has not been established in these cases. It has been demonstrated that an excessive rise in blood pressure, should it occur, can be reversed by resumption of clonidine hydrochloride therapy or by intravenous phentolamine. Patients who engage in potentially hazardous activities, such as operating machinery or driving, should be advised of the sedative effect. This drug may enhance the CNS-depressive effects of alcohol, barbiturates and other sedatives. Like any other agent lowering blood pressure, clonidine hydrochloride should be used with caution in patients with severe coronary insufficiency, recent myocardial infarction, cerebrovascular disease or chronic renal failure.

As an integral part of their overall long-term care, patients treated with Catapres (clonidine hydrochloride) should receive periodic eye examinations. While, except for some dryness of the eyes, no drug-related abnormal ophthalmologic findings have been recorded with Catapres (clonidine hydrochloride), in several studies the drug produced a dose-dependent increase in the incidence and severity of spontaneously occurring retinal degeneration in albino rats treated for 6 months or longer.

Adverse Reactions: The most common reactions are dry mouth, drowsiness and sedation. Constipation, dizziness, headache, and fatigue have been reported. Generally these effects tend to diminish with continued therapy. The following reactions have been associated with the drug, some of them rarely. (In some instances an exact causal relationship has not been established.) These include: Anorexia, malaise, nausea, vomiting, parotid pain, mild transient abnormalities in liver function tests; one report of possible drug-induced hepatitis without icterus and hyperbilirubinemia in a patient receiving clonidine hydrochloride, chlorthalidone and papaverine hydrochloride. Weight gain, transient elevation of blood glucose, or serum creatine phosphokinase, congestive heart failure, Raynaud's phenomenon; vivid dreams or nightmares, insomnia, other behavioral changes, nervousness, restlessness, anxiety and mental depression. Also rash, angioneurotic edema, hives, urticaria, thinning of the hair, pruritus not associated with a rash, impotence, urinary retention, increased sensitivity to alcohol, dryness, itching or burning of the eyes, dryness of the nasal mucosa, pallor, gynecomastia, weakly positive Coombs' test, asymptomatic electrocardiographic abnormalities manifested as Wenckebach period or ventricular trigeminy.

Overdosage: Profound hypotension, weakness, somnolence, diminished or absent reflexes and vomiting followed the accidental ingestion of Catapres (clonidine hydrochloride) by several children from 19 months to 5 years of age. Gastric lavage and administration of an analeptic and vasopressor led to complete recovery within 24 hours. Tolazoline in intravenous doses of 10 mg at 30-minute intervals usually abolishes all effects of Catapres (clonidine hydrochloride) overdosage.

How Supplied: Catapres, brand of clonidine hydrochloride, is available as 0.1 mg (tan) and 0.2 mg (orange) oval, single-scored tablets in bottles of 100 and 1000.

For complete details, please see full prescribing information.

Under license from Boehringer Ingelheim GmbH

Distributed by
Boehringer Ingelheim Ltd.
Ridgefield, CT 06877

THE IN BASKET THAT'S ON ITS WAY OUT.

Health care professionals all over California are finding a way to eliminate insurance forms. And patient billing, recall notices, past due reminders and more.

They've found that the Datamedic system can handle these major sources of burdensome paperwork automatically. . .and provide useful practice management reports as well.

More importantly, they've found they retain complete control over vital income figures and patient records. The economical Datamedic office computer terminal—built to our specifications—lets them enter and verify all information before it is forwarded to our central processing center.

From the information they provide, we generate special reports on practice income, including aging summaries and a record of actions taken on overdue accounts.

Datamedic does all this and more. All patient bills, reminders and recall notices are mailed automatically. Insurance forms are computer-coded, then submitted directly to the carrier to help reduce clerical errors and paperwork handling. In some cases, forms are transmitted to the carrier electronically, expediting payment significantly.

In addition to providing more efficient record and money management, Datamedic gives you more time to spend with your patients, a chance to keep abreast of the latest developments in your field. . . perhaps a few extra hours to spend with your family and friends.

If this sounds like the kind of help your office needs, give us a call. We'll send you a brochure explaining the system in detail. Or arrange for one of our representatives to give you a demonstration. Either way, you'll soon be able to use that *in* basket for something a lot nicer than insurance forms.

datamedic of california
1235 Mission Street, San Francisco, CA 94103
(415) 864-1251

SOME PEOPLE CAN TOLERATE ANYTHING

PERCOCET®-5

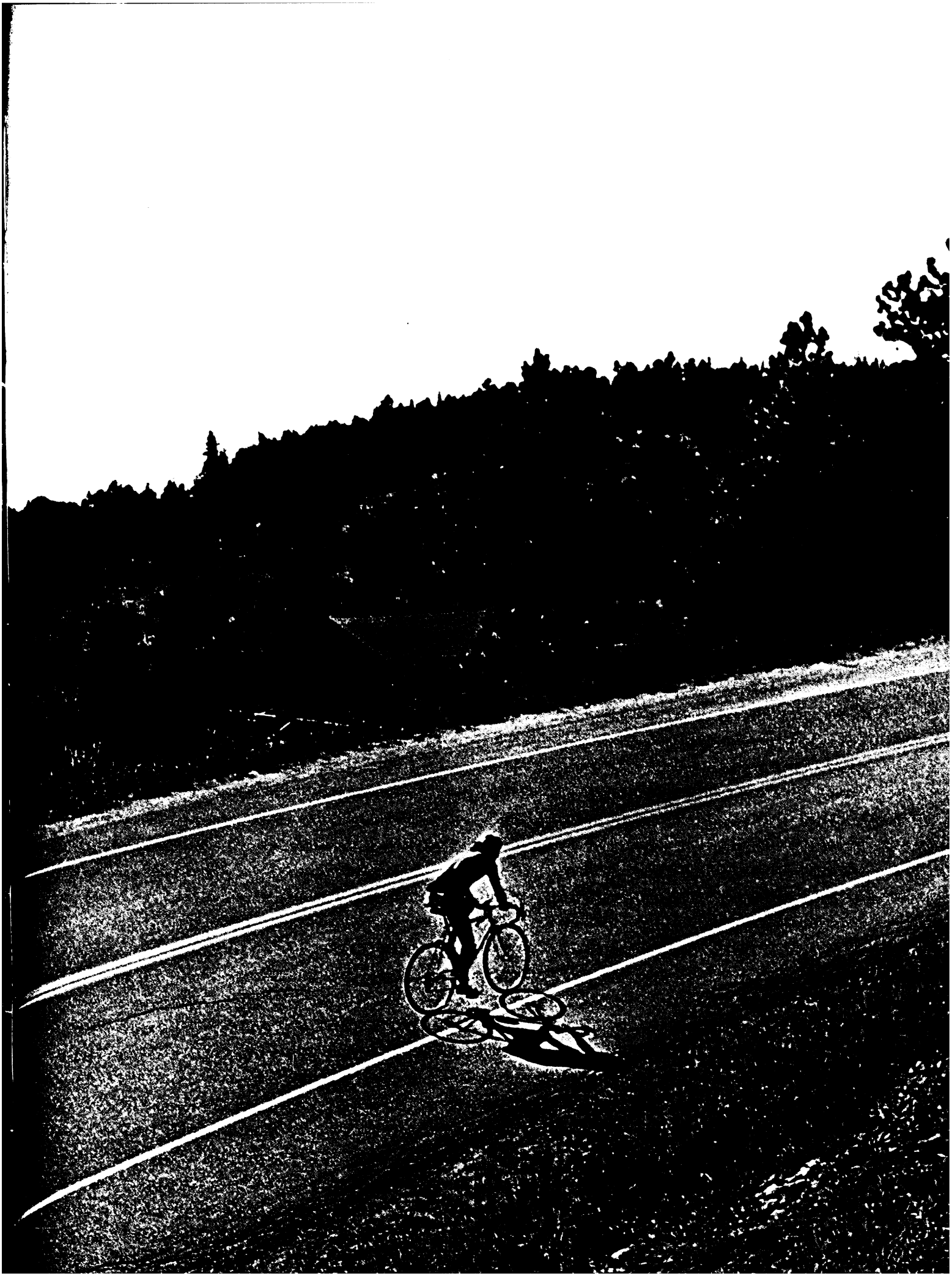
Each tablet contains 5 mg oxycodone HCl (WARNING: May be habit forming) and 325 mg acetaminophen (APAP) C II

...FOR THOSE WHO CAN'T TOLERATE ASPIRIN

- □ indicated for moderate to moderately severe pain
- □ contains well-tolerated acetaminophen
- □ provides the effective analgesia of oxycodone
- □ scored tablet permits finer titration
- □ convenient, economical q6h dosage

Please see opposite page for brief summary of prescribing information.

THE BETTMANN ARCHIVE



Brethine®
terbutaline sulfate

Now the most widely prescribed bronchodilator tablet in the U.S.

In the long run, breathing is believing.

1. Formgren H: The therapeutic value of oral long-term treatment with terbutaline in asthma. Scand J Respir Dis *56*(6):321-328, 1975.
2. Larsson S et al: Lack of bronchial beta adrenoceptor resistance in asthmatics during long-term treatment with terbutaline. J Allergy Clin Immunol *59*(2):93-100, 1977.
3. Wilson AF et al: Cardiopulmonary effects of long-term bronchodilator administration. J Allergy Clin Immunol *58*(1):204-212, 1976.

Geigy

Brethine®, brand of terbutaline sulfate, Tablets 5 mg., Tablets 2.5 mg. *Before prescribing or administering, please consult complete product information, a summary of which follows:*

Tablets contain 5 mg. (equivalent to 4.1 mg. of free base) or 2.5 mg. (equivalent to 2.05 mg. of free base) of Brethine, brand of terbutaline sulfate.

Indications: As a bronchodilator for bronchial asthma and for reversible bronchospasm which may occur in association with bronchitis and emphysema.

Contraindications: Known hypersensitivity to sympathomimetic amines.

Warnings: *Usage in Pregnancy:* The safety of the use of Brethine, brand of terbutaline sulfate, in human pregnancy has not been established. The use of the drug in pregnancy, lactation, or women of childbearing potential requires that the expected therapeutic benefit of the drug be weighed against its possible hazards to the mother or child.

Usage in Pediatrics: Brethine, brand of terbutaline sulfate, tablets are not presently recommended for children below the age of twelve years due to insufficient clinical data in this pediatric group.

Precautions: Brethine, brand of terbutaline sulfate, should be used with caution in patients with diabetes, hypertension, hyperthyroidism, and a history of seizures. As with other sympathomimetic bronchodilator agents, Brethine, brand of terbutaline sulfate, should be administered cautiously to cardiac patients, especially those with associated arrhythmias. Although the concomitant use of Brethine, brand of terbutaline sulfate, with other sympathomimetic agents is not recommended, the use of an aerosol bronchodilator of the adrenergic stimulant type for the relief of an acute bronchospasm is not precluded in patients receiving chronic oral Brethine, brand of terbutaline sulfate, therapy.

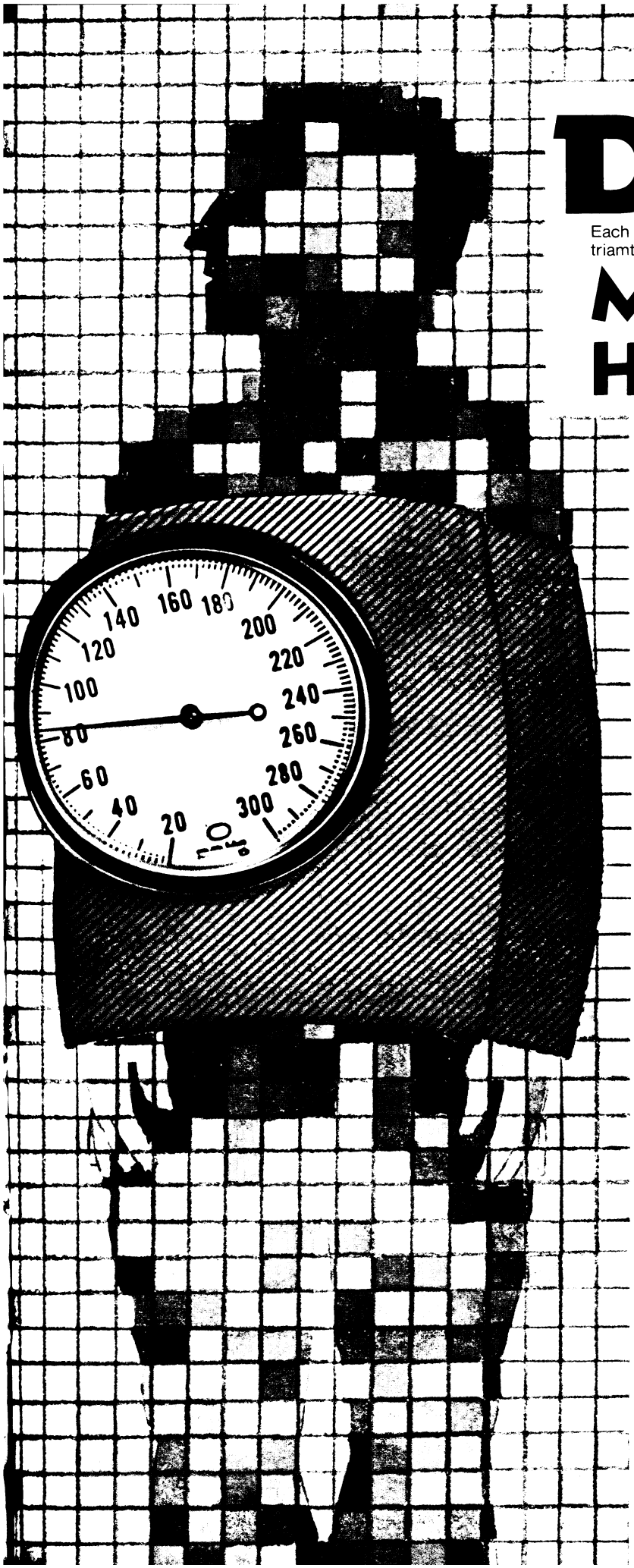
Adverse Reactions: Commonly observed side effects include nervousness and tremor. Other reported reactions include headache, increased heart rate, palpitations, drowsiness, nausea, vomiting, sweating, and muscle cramps. These reactions are generally transient in nature, usually do not require treatment, and appear to diminish in frequency with continued therapy. In general, all the side effects observed are characteristic of those commonly seen with sympathomimetic amines.

How Supplied: Round, scored, white tablets of 5 mg. in bottles of 100 and 1,000 and Unit Dose Packages of 100; oval, scored, white tablets of 2.5 mg. in bottles of 100 and 1,000 and Unit Dose Packages of 100.

(B) 667005 (Rev. 3/78) C78-9

GEIGY Pharmaceuticals
Division of CIBA-GEIGY Corporation
Ardsley, New York 10502

Printed in U.S.A. (7/78) 323-81511



Dyazide®

Each capsule contains 50 mg. of Dyrenium® (brand of triamterene) and 25 mg. of hydrochlorothiazide.

Makes Sense in Hypertension*

Before prescribing, see complete prescribing information in SK&F Co. literature or *PDR*. A brief summary follows:

* **Warning**
This drug is not indicated for initial therapy of edema or hypertension. Edema or hypertension requires therapy titrated to the individual. If this combination represents the dosage so determined, its use may be more convenient in patient management. Treatment of hypertension and edema is not static, but must be reevaluated as conditions in each patient warrant.

Contraindications: Further use in anuria, progressive renal or hepatic dysfunction, hyperkalemia. Pre-existing elevated serum potassium. Hypersensitivity to either component or other sulfonamide-derived drugs.

Warnings: Do not use potassium supplements, dietary or otherwise, unless hypokalemia develops or dietary intake of potassium is markedly impaired. If supplementary potassium is needed, potassium tablets should not be used. Hyperkalemia can occur, and has been associated with cardiac irregularities. It is more likely in the severely ill, with urine volume less than one liter/day, the elderly and diabetics with suspected or confirmed renal insufficiency. Periodically, serum K+ levels should be determined. If hyperkalemia develops, substitute a thiazide alone, restrict K+ intake. **Associated widened QRS complex or arrhythmia requires prompt additional therapy.** Thiazides cross the placental barrier and appear in cord blood. Use in pregnancy requires weighing anticipated benefits against possible hazards, including fetal or neonatal jaundice, thrombocytopenia, other adverse reactions seen in adults. Thiazides appear and triamterene may appear in breast milk. If their use is essential, the patient should stop nursing. Adequate information on use in children is not available.

Precautions: Do periodic serum electrolyte determinations (particularly important in patients vomiting excessively or receiving parenteral fluids). Periodic BUN and serum creatinine determinations should be made, especially in the elderly, diabetics or those with suspected or confirmed renal insufficiency. Watch for signs of impending coma in severe liver disease. If spironolactone is used concomitantly, determine serum K+ frequently; both can cause K+ retention and elevated serum K+. Two deaths have been reported with such concomitant therapy (in one, recommended dosage was exceeded, in the other serum electrolytes were not properly monitored). Observe regularly for possible blood dyscrasias, liver damage, other idiosyncratic reactions. Blood dyscrasias have been reported in patients receiving triamterene, and leukopenia, thrombocytopenia, agranulocytosis, and aplastic anemia have been reported with thiazides. Triamterene is a weak folic acid antagonist. Do periodic blood studies in cirrhotics with splenomegaly. Antihypertensive effect may be enhanced in post-sympathectomy patients. Use cautiously in surgical patients. The following may occur: transient elevated BUN or creatinine or both, hyperglycemia and glycosuria (diabetic insulin requirements may be altered), hyperuricemia and gout, digitalis intoxication (in hypokalemia), decreasing alkali reserve with possible metabolic acidosis. 'Dyazide' interferes with fluorescent measurement of quinidine.

Adverse Reactions: Muscle cramps, weakness, dizziness, headache, dry mouth; anaphylaxis, rash, urticaria, photosensitivity, purpura, other dermatological conditions; nausea and vomiting, diarrhea, constipation, other gastrointestinal disturbances. Necrotizing vasculitis, paresthesias, icterus, pancreatitis, xanthopsia and, rarely, allergic pneumonitis have occurred with thiazides alone.

Supplied: Bottles of 100 and 1000 capsules; Single Unit Packages of 100 (intended for institutional use only).

SK&F CO.
a SmithKline company
Carolina, P.R. 00630

Neosporin® Ointment

(Polymyxin B-Bacitracin-Neomycin)

This potent broad-spectrum antibacterial provides overlapping action to help combat infection caused by common susceptible pathogens (including staph and strep). The petrolatum base is gently occlusive, protective and enhances spreading.

Neomycin

Staphylococcus
Haemophilus
Klebsiella
Aerobacter
Escherichia
Proteus
Corynebacterium
Streptococcus
Pneumococcus

Bacitracin

Staphylococcus
Corynebacterium
Streptococcus
Pneumococcus

Polymyxin B

Pseudomonas
Haemophilus
Klebsiella
Aerobacter
Escherichia

In vitro overlapping antibacterial action of Neosporin® Ointment (polymyxin B-bacitracin-neomycin).

Wellcome / **Burroughs Wellcome Co.**
Research Triangle Park
North Carolina 27709

Neosporin® Ointment

(Polymyxin B-Bacitracin-Neomycin)

Each gram contains: Aerosporin® brand Polymyxin B Sulfate 5,000 units; zinc bacitracin 400 units; neomycin sulfate 5 mg (equivalent to 3.5 mg neomycin base); special white petrolatum qs; in tubes of 1 oz and 1/2 oz and 1/32 oz (approx.) foil packets.

WARNING: Because of the potential hazard of nephrotoxicity and ototoxicity due to neomycin, care should be exercised when using this product in treating extensive burns, trophic ulceration and other extensive conditions where absorption of neomycin is possible. In burns where more than 20 percent of the body surface is affected, especially if the patient has impaired renal function or is receiving other aminoglycoside antibiotics concurrently, not more than one application a day is recommended.

When using neomycin-containing products to control secondary infection in the chronic dermatoses, it should be borne in mind that the skin is more liable to become sensitized to many substances, including neomycin. The manifestation of sensitization to neomycin is usually a low grade reddening with swelling, dry scaling and itching; it may be manifest simply as failure to heal. During long-term use of neomycin-containing products, periodic examination for such signs is advisable and the patient should be told to discontinue the product if they are observed. These symptoms regress quickly on withdrawing the medication. Neomycin-containing applications should be avoided for that patient thereafter.

PRECAUTIONS: As with other antibacterial preparations, prolonged use may result in overgrowth of nonsusceptible organisms, including fungi. Appropriate measures should be taken if this occurs.

ADVERSE REACTIONS: Neomycin is a not uncommon cutaneous sensitizer. Articles in the current literature indicate an increase in the prevalence of persons allergic to neomycin. Ototoxicity and nephrotoxicity have been reported (see Warning section).

Complete literature available on request from Professional Services Dept. PML.

CALIFORNIA MEDICAL ASSOCIATION

1979 Annual Postgraduate Institutes

WEST COAST COUNTIES

DOUBLETREE INN—MONTEREY

APRIL 5-7

- Mental Dysfunction: Depression, Crisis Intervention, and Suicide
- Holistic Aspects of Medical Care and Evaluation
- Funduscopic Manifestation of Systemic Disease
- Peptic Ulcers Disease—Recent Advances in Treatment
- What Can We Do for Cancer Today
- Antibiotics—When to Use
- Aspects of Human Sexuality

Faculty From UCD School of Medicine

WINTER INSTITUTE

LAKELAND VILLAGE—SOUTH LAKE TAHOE

JANUARY 25-28

- Cardiovascular Aspects of Exercise
- Emergency Care for Knees, Spine, Hands
- Sports Injury Rehabilitation
- Team Physician
- Women in Athletics

Faculty From UCSF School of Medicine

These programs are acceptable for Category I credit in the CMA Certification Program, and are accepted by the American Academy of Family Practitioners.

SAN JOAQUIN VALLEY COUNTIES

THE AHWAHNEE—YOSEMITE

APRIL 19-21

- Cardiac Rehabilitation
- Update on Acute Myocardial Infarctions
- Psychiatric Pharmacology
- Organic Brain Syndrome
- Coping with Being the Spouse of a Physician
- Genital Herpes
- Anti-Viral Drugs
- Slow Viruses
- Screening for Diabetes
- Genetic Counseling
- Low Back Pain

Faculty From UCSD School of Medicine

1979 CMA POSTGRADUATE INSTITUTES

I plan to attend the following Postgraduate Institute(s):

☐ WINTER INSTITUTE
January 25-28, 1979
South Lake Tahoe

☐ WEST COAST COUNTIES
April 5-7, 1979
Monterey

☐ SAN JOAQUIN VALLEY
April 19-21, 1979
Yosemite

FEE: $60 for EACH institute
($90 for Non-CMA Members)
Free for retired members

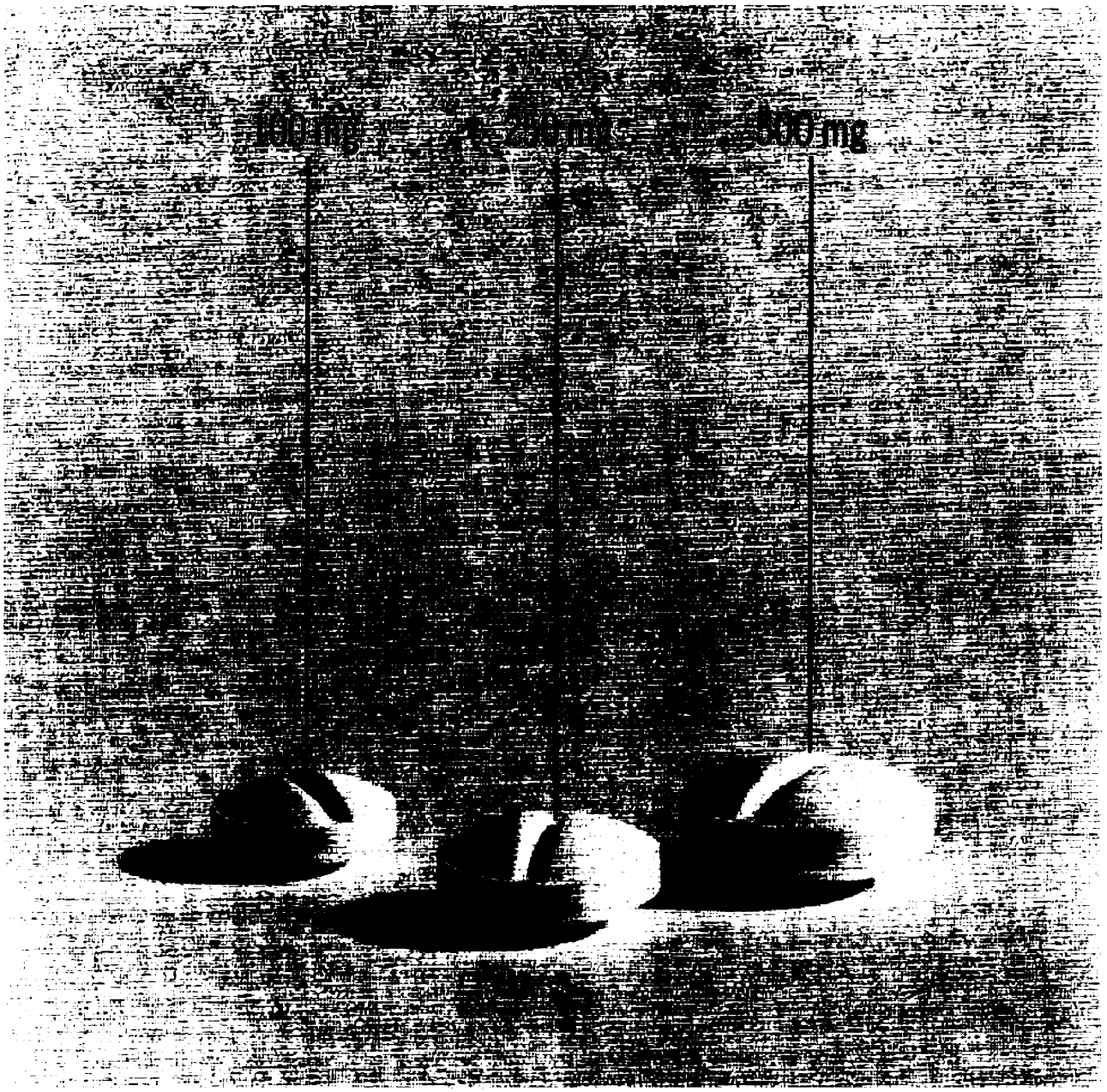
Please make check payable to California Medical Association

NAME _____ SPECIALTY _____

ADDRESS _____

CITY _____ ZIP _____

MAIL TO: CMA, Continuing Medical Education, 731 Market Street, San Francisco, California 94103
Further information will be sent to you.



Tolinase®
tolazamide, Upjohn

Please contact your Upjohn representative for additional product information.

Upjohn

J-5695-6

Classified Advertisements

The rate for each insertion is **$2.50 per line** (average six words per line) **with five line minimum.**

Box number charge: $1.50 each month.

Classified display rates $25.00 per inch.

Copy for classified advertisements should be received not later than **the fifth of the month preceding issue.** • Classified advertisers using Box Numbers forbid the disclosure of their identity. Your inquiries in writing will be forwarded to Box Number advertisers. The right is reserved to reject or modify all classified advertising copy in conformity with the rules of the Advertising Committee.

CLASSIFIED ADVERTISEMENTS ARE PAYABLE IN ADVANCE

PHYSICIANS WANTED

PULMONARY MEDICINE GROUP—SAN DIEGO AREA seeks associate for practice that includes medical direction of pulmonary medicine departments as well as office and hospital consultations. Submit CV to Box 2771, La Mesa, CA 92041.

OB/GYN wanted. Board certified or eligible. To associate in interesting mixed OB/GYN practice including infertility and medical education. Lovely growing city in mountain west. Near skiing, fishing, back packing. Salary negotiable, malpractice paid. Robert L. Bailey, MD, 222 No. 2nd St., Suite 111, Boise, ID 83702.

MEDICAL DIRECTOR—Fresno County Department of Health desires California licensed, full-time Board certified/eligible OB-Gyn Medical Director for Maternal Health, including Family Planning. Staff privileges available at excellent UC San Francisco-affiliated training facility. Contract salary $48,000 to $51,738. Contact Harold J. Haughton, MD, Box 11867, Fresno, CA 93775, or call (209) 488-3782.

CALIFORNIA STATE HOSPITAL SYSTEM

PROFESSIONAL CHALLENGE

Most severe mental disabilities
Most severe developmental disabilities

PROFESSIONAL REWARD

- **SALARY $41,664 WITHOUT SPECIALIZATION**
  SALARY $44,964 (BOARD-CERTIFIED)
- **DUAL CLINICAL-TEACHING APPOINTMENTS**
- **$10,162 IN EMPLOYEE BENEFITS**
- **APPROVED CME CREDITS**

Openings now in state hospitals throughout California for physicians in all specialties. Part-time positions available, where no conflict of interest.

Write or call:

Stan Nielsen, Recruitment Manager 744 P Street Sacramento, CA 95814 (916) 322-1221

- **NEUROLOGIST** • **PSYCHIATRIST**
- **CARDIOLOGIST** • **ORTHOPEDIC SURGEON**
- **OTOLARYNGOLOGIST**
- **FAMILY PRACTITIONER**

Neurologist with neurodiagnostic training and experience. Cardiologist—Non-invasive and invasive. Needed for active medical group. Full-time. Attractive starting salary. Free health and accident insurance. Adjacent to JCAH-CMA approved comprehensive general hospital. Correspondence to **Med. Dir., P.O. Box 243, Lakewood, CA 90714.**

PHYSICIANS WANTED

COLORADO SPRINGS, COLORADO—Emergency Medicine Staff physician needed to join four-physician group; Excellent competitive income on minimum guarantee/fee-for-service basis. Colorado license required. Contact Joe Gatewood, MD, Medical Director, Chase Stone Center, Holly Sugar Building, Suite 440, Colorado Springs, CO 80903, or call toll free 1-800-325-3982.

BOARD CERTIFIED, Thoracic-Vascular Surgeon needed at VA Hospital, Livermore, CA. Ideal living, good climate and clean air. Malpractice insurance not needed. Position available at present. Salary dependent on experience and qualifications. Contact: Byron V. Whitney, MD, FACS, Chief, Surgical Services, VA Hospital, Livermore, CA. Tel (415) 447-2560, Ext. 213.

WANTED: Univ. trained general surgeon needed to join 2 other general surgeons in 15 man clinic. Excellent qualifications req'd. Location: southern Idaho, near excellent outdoor recreation. Write Box 6003, Western Journal of Medicine, 731 Market St., San Francisco 94103.

OB/GYN SPECIALIST. Northern Calif. (Redding). Shasta General Hospital (fully accedited). Board certified or eligible. Active outpatient clinic and inpatient unit. 12 full time physician staff includes 2 OB/GYN. $43,000 yr. ($44,500 if board certified). Independent group practice arrangement under consideration. Excellent benefits include prepaid malpractice insurance. Contact Eugene Earl, MD, Medical Director, Shasta General Hospital, 2630 Hospital Lane, Redding, CA 96001, phone (916) 241-3232.

THE UNIVERSITY OF IOWA COLLEGE OF MEDICINE, DEPARTMENT OF FAMILY PRACTICE has the following faculty positions open: (1) Physician Coordinator for Iowa's State Wide Affiliated Family Practice Residency Programs. Tasks will include: maintaining continuous liaison with Program Directors; responding to their needs in the area of educational tools; facilitating the exchange of information, faculty, residents, etc. among programs; and development of a methodology for regular program review. Eligibility for certification by the American Board of Family Practice is required. (2) Family Physician Educator to educate Family Practice Residents and medical students family medicine. Eligibility for certification by the American Board of Family Practice is required. (3) Director of the Williamsburg Family Practice Office. Tasks will include: the coordination of residents and medical students' educational experience in a model office, and management of the model office. Eligibility for certification by the American Board of Family Practice is required. Direct inquiries to: Robert E. Rakel, MD, Professor and Head, Department of Family Practice, University of Iowa, Iowa City, Iowa 52242. The University of Iowa is an equal opportunity and affirmative action employer.

ANESTHESIA SERVICE GROUP

Complete coverage for hospital, clinic or office on "AS NEEDED" basis in Bay Area, So. Calif. and San Diego. Call or write to: P.O. Box 6275, Oakland CA 94603 (415) 763-0336; P.O. Box 1102, S. Monica, CA 90406 (213) 393-4267; P.O. Box 2828, S. Diego, CA 92112 (714) 231-0123.

Humana

GO WHERE THE OPPORTUNITY IS!

Join the numerous physicians who have chosen to establish practices in HUMANA communities from coast to coast. After you choose the opportunity that meets your needs, we can provide you with financial assistance in getting started.

Request our OPPORTUNITIES NEWSLETTER

For confidential consideration please send curriculum vitae to

Professional Relations, Dept. D
HUMANA INC., P.O. Box 1438
Louisville KY 40201

(502) 589-3790

HUMANA
THE HOSPITAL COMPANY

PHYSICIANS WANTED

FAMILY PRACTITIONER NEEDED for 4-man medical corporation. Small metropolitan area. Very friendly with close proximity to Big Cities and Beaches. Local City College and 4 year College with all social amenities and sports. Prepaid malpractice, on call shared by all in group. Competitive salary—full corporation benefits immediately. Write, Manor Medical Group, Inc., 223 China Grade Loop, Bakersfield, California or call collect (805) 399-9111—ask for Peggy Briscoe.

ASSOCIATE MEDICAL DIRECTOR, GENERAL INTERNIST WITH CARDIOLOGY INTEREST, needed for 38-bed rehabilitation hospital now committed to expansion. Will assist physiatrist in patient care and provide medical supervision to cardiac rehab program. Located in rapidly growing city of 115,000 which provides excellent year-round sports and financial diversification opportunities. Compensation negotiable and dependent upon experience and qualifications. Contact Kenneth D. Smyth, MD, Medical Director, Idaho Elks Rehabilitation Hospital, 204 Fort Place, Boise, Idaho 83702; (208) 343-2583.

KERN COUNTY PUBLIC HEALTH DEPARTMENT has openings for qualified physicians with experience and current interest in communicable disease and MCH. Salary competitive with generous benefits. CA license required. Direct inquiries and curriculum vitae to Leon Hebertson, MD, Health Officer, Pub. Health Dept., P.O. Box 997, Bakersfield, CA 93302.

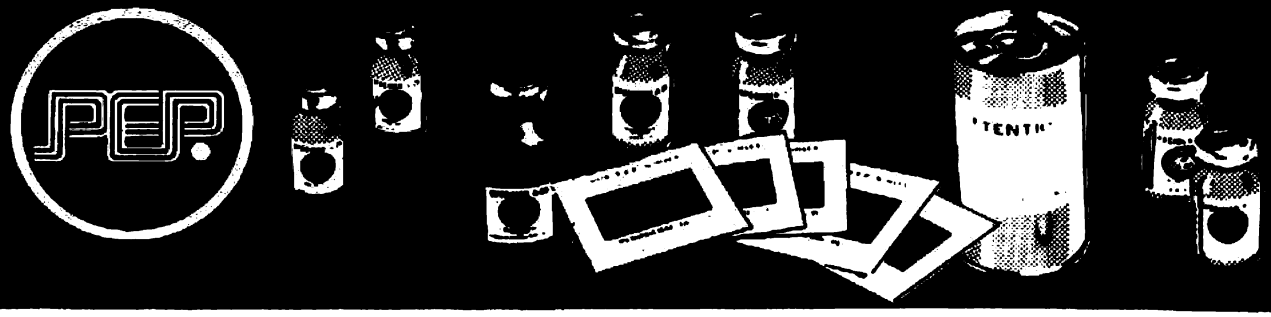
EXCELLENT OPPORTUNITY—for a physician in Cedar Rapids, Iowa. Excellent medical facilities in city. Assume active practice of recently deceased solo practitioner of internal medicine. Conveniently located, furnished and equipped office leased; consists of private office, two examination rooms, equipped laboratory, business office and waiting room. Write Trust Department, P.O. Box 1807, Cedar Rapids, Iowa 52406.

PHYSICIAN OPPORTUNITY—FAMILY PHYSICIANS—The Department of Family Practice, Southern Illinois University School of Medicine, is seeking Family Physicians with experience/interest in teaching to join its full-time faculty. The Department currently has 11 full-time MD faculty and is recruiting for 3 additional faculty. To express interest or obtain further details, contact William L. Stewart, MD, SIU Dept. of Family Practice, 421 N. Ninth, Springfield, Illinois 62702. Phone: (217) 782-0223. SIU is an equal opportunity/affirmative action employer.

WANTED IMMEDIATELY: Preferably Board Certified Cardiologist for noninvasive cardiology practice in California. Reply Box 6001, The Western Journal of Medicine, 731 Market St., San Francisco, CA 94103.

(Continued on Page 26)

CAP PROFICIENCY EVALUATION PROGRAM



THE PEP KIT Series L PRICE **$295**

SPECIMENS ARE PROVIDED FOR THE FOLLOWING:

a. Hemoglobin, white blood count, hematocrit and prothrombin time
b. Urinalysis for specific gravity, reducing substance, bilirubin, hemoglobin, pH, pregnancy test.
c. Kodachrome slides for hematology and urinalysis.
d. Infectious mononucleosis.
e. Bacteriology
f. Chemistry specimens containing specific levels for glucose, bilirubin, cholesterol, urea nitrogen, and uric acid.

PEP was developed by the CAP in 1969 to assist the physician in managing his office laboratory.

If you do some of your own laboratory tests in house, this program offers the following specific benefits:

- *An outside quality control check on the results of your office laboratory system.*
- *A peer evaluation with hundreds of other physician office laboratories employing the same methods, instruments and reagents.*
- *A check on possible sources of error.*
- *Approval by California, Maryland, South Carolina and other states requiring outside quality control of physician office laboratories.*
- *A listing of local Consultants who are willing to assist you (on a voluntary or fee-for-service basis depending upon local practices) in your laboratory to resolve any technical or procedural problems. Participants may contact the CAP office for this listing.*
- *An extra measure of assurance concerning the laboratory values upon which you base your office patient care decisions.*

SURVEY SERUM Series SS•2 PRICE **$66**

PEP program participants will be able to purchase additional samples of the serum used in the chemistry section of this program. Additional samples will be mailed after the regular specimens so that they will arrive at about the same time that the laboratory receives its evaluation reports.

ENDORSED BY THE **AMERICAN COLLEGE OF PHYSICIANS • AMERICAN ACADEMY OF FAMILY PHYSICIANS**

PLEASE TYPE OR PRINT—FILL IN AND MAIL FORM TO:

COLLEGE OF AMERICAN PATHOLOGISTS / 7400 NORTH SKOKIE BLVD. / SKOKIE, IL 60077

To guarantee availability of all shipments in Series L and SS-2, orders should be received by **December 15, 1978**

PLEASE SEND:	EXTENDED COST
☐ Sets of **Series L** @ **$295** per set	
☐ Sets of **Series SS-2** @ **$66** per set	
Total Amount	
Prepaid Amount	
Total Due	

AUTHORIZED SIGNATURE: (Required for Processing)

Check below to have Evaluation Copies sent to the following:

☐ Participation in these programs is to meet state and/or Medicare proficiency testing requirements. Copies of test results are to be sent to the state agency:

STATE_____ I.D. NUMBER_____

Permission is granted to send results to the following consultants _____

Check or Purchase Order must accompany subscription—payable to:
COLLEGE OF AMERICAN PATHOLOGISTS
☐ Check for $_____ Enclosed
☐ P.O. #_____ Enclosed

For CAP Office use only:
A/R No. _____
Batch No. _____
Rec. CAP (Date) _____

WJ11 CAP No. (If Applicable) ☐☐☐☐☐•☐☐☐•☐☐☐

Send Survey Sets to: PLEASE TYPE OR PRINT

NAME _____
INSTITUTION _____
ADDRESS _____
CITY _____ STATE _____ ZIP _____

Bill to:

NAME _____
INSTITUTION _____
ADDRESS _____
CITY _____ STATE _____ ZIP _____

(Continued from Page 24)

PHYSICIANS WANTED

WANTED: ACADEMIC GASTROENTEROLOGIST, Associate Professor or Professor, for major University Teaching Hospital. Must be an established investigator with expertise in intestinal morphology and manometry. Board certification required. Please send all inquiries to Box 6007, Western Journal of Medicine, 731 Market St., San Francisco, CA 94103.

INTERNIST, UROLOGIST AND ORTHOPOD practices available in growing rural community on beautiful Clearlake in Lake County. Office space available. Contact Paul L. Stormoen, Administrator, Redbud Community Hospital, P.O. Box 6720, Clearlake Highlands, CA 95422. (707) 994-6486.

ORTHOPEDIC SURGEON for group in LA County. Complete x-ray and lab facilities. Substantial salary leading to a partnership. Free health and accident insurance. Malpractice and medical dues paid. Contact Mr. Fine, 2675 E. Slauson Ave., Huntington Park, CA 90255. Phone: (213) 589-6681.

OPHTHALMOLOGIST needed for large medical group in LA County. Complete lab and x-ray facilities. Starting salary is $4,000 per month w/increments to follow until eventual partnership is reached. Free health and accident insurance. Malpractice and medical dues paid. Contact Mr. Fine, 2675 E. Slauson Ave., Huntington Park, CA 90255. Phone (213) 589-6681.

G.P. needed for large medical group in LA County. Complete x-ray and lab facilities. Starting salary is $4,000 per month w/increments to follow until eventual partnership is reached. Free health and accident insurance. Malpractice and medical dues paid. Contact Mr. Fine, 2675 E. Slauson Ave., Huntington Park, CA 90255. Phone (213) 589-6681.

PEDIATRICIAN needed for group in LA County. Complete x-ray and lab facilities. Starting salary is $4,000 per month w/increments to follow until eventual partnership is reached. Free health and accident insurance. Malpractice and medical dues paid. Contact Mr. Fine, 2675 E. Slauson Ave., Huntington Park, CA 90255. Phone (213) 589-6681.

OB/GYN needed for large group in LA County. Complete x-ray and lab facilities. Starting salary is $4,000 per month w/increments to follow until eventual partnership is reached. Free health and accident insurance. Malpractice and medical dues paid. Contact Mr. Fine, 2675 E. Slauson Ave., Huntington Park, CA 90255. Phone (213) 589-6681.

PHYSICIANS WANTED

FAMILY PHYSICIAN: Association with two physicians with office adjacent to 50-bed accredited hospital. Located in irrigated valley, 10,000 population, southwest Idaho, 30 miles from Boise; mountains close by. Contact: R. Kniseley, MD or Wm. Jewell, MD, 1024 E. Locust, Emmett, ID 83617.

NEEDED, GENERAL PRACTITIONER OR INTERNIST, Town of 50,000 population, surrounded by large metropolitan area. Fifty miles East of Los Angeles. Outstanding hospitals within eight miles. Office space available immediately—partnership if desired—practice volume unlimited. Please reply to Mrs. E. Closser, 128 E. G St., Colton, CA 92324.

CALIFORNIA-CENTRAL-PEDIATRICIAN wanted. Multi-Specialty group, individual practice. Association, salary, percentage negotiable. Near sailing, skiing fishing, etc. 1½ hours to San Francisco. Send CV to D. Jack Names, MD, 1400 Florida Ave. St. 104, Modesto, CA 95350 (209) 521-1050.

SITUATIONS WANTED

OTOLARYNGOLOGIST: UCSF-Tulane University trained in Head and Neck, Cosmetic and Maxillofacial Surgery, Otology, ENG and Allergy. California license. AAOO Merit Award for Research. CV upon request. Available August 1979. Reply Box No. 6000, The Western Journal of Medicine, 731 Market St., San Francisco, CA 94103.

PATHOLOGIST, Board Certified PA and CP, with 9 years post-doctorate training and 13 years experience in one hospital, seeks to relocate. Solo or group practice. Write Box 6002, Western Journal of Medicine, 731 Market St., San Francisco, CA 94103.

OCULOPLASTIC AND LACRIMAL SURGEON. Board Certified Ophthalmologist, 1 year post-residency fellowship in oculoplastics. Fellow, Am. Soc. Ophth. Plastic and Reconstr. Surg. Pilot. Will travel anywhere in Calif. (near an airport) to do oculoplastic/lacrimal cases, provided adequate facilities, assistance and post-op care available. C.V. on request. Please reply to Box 6004, The Western Journal of Medicine, 731 Market St., San Francisco, CA 94103.

PHYSICIAN with 10 years experience and 4 years postgraduate training in **occupation** and/or **medical outpatient clinic,** desires position in San Francisco-Bay Area. Available September, 1978. Write Box 5999, The Western Journal of Medicine, 731 Market St., San Francisco, CA 94103.

SITUATIONS WANTED

ANESTHETIST—available for world wide relief services. Anesthesia Services, 440 Davis Court, No. 311, San Francisco, CA 94111. (415) 391-3339.

OPHTHALMOLOGIST, Board Certified, 35; in active practice 4 years. Planning on relocating. Will consider all areas. Desire practice purchase, or solo, group or association. Box 6010, Western Journal of Medicine, 731 Market St., San Francisco, CA 94103.

CARDIOLOGIST, 30, ABIM eligible, C.V. diseases eligible. Catheter training in prestigious university center. Trained in noninvasive techniques, pacemakers, Swan-Ganz. Seeks group practice, partnership, hospital based practice. Will also do some Internal medicine. Available July/79. Reply Box 6011, Western Journal of Medicine, 731 Market St., San Francisco, CA 94103.

RADIOLOGIST, 41, ABR, university trained, seeks clinic or office practice. CA license. Wish to relocate near metropolitan area in California. Write Box 6009, Western Journal of Medicine, 731 Market St., San Francisco, CA 94103.

ASSOCIATE MEDICAL DIRECTOR, major insurance company, seeks relocation to San Francisco area. Write Box 6013, Western Journal of Medicine, 731 Market St., San Francisco, CA 94103.

ORTHOPEDIC SURGEON 50. Board certified FACS and AAOS would like to relocate in California. Metropolitan areas preferred. University trained with academic background. Private position or academic. Reply Box 6012, Western Journal of Medicine, 731 Market St., San Francisco, CA 94103.

FAMILY NURSE PRACTITIONER

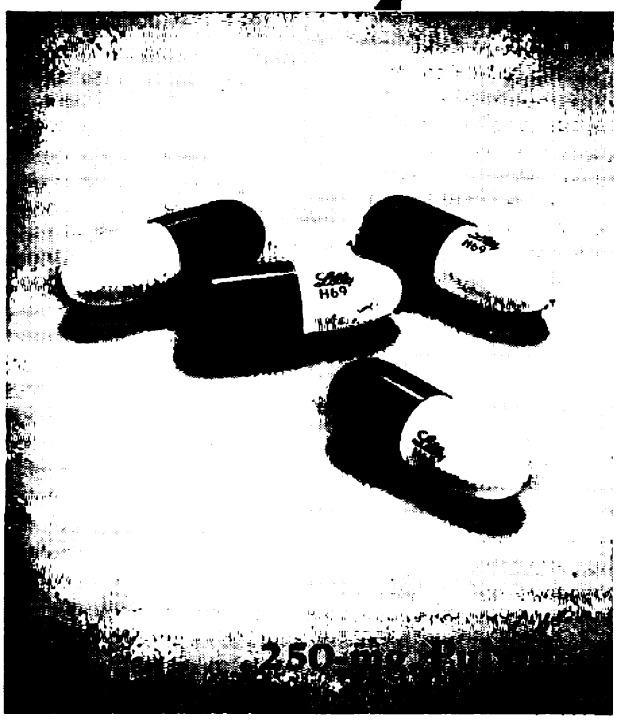
THE DEPARTMENT OF FAMILY PRACTICE at Kern Medical Center, Bakersfield, California, is seeking a full-time family nurse practitioner to work in the Family Practice Center with patients, resident physicians, faculty, and trainees in the UC Davis Family Nurse Practitioner Program and the Stanford Physician's Assistant Program. Duties include direct patient care and teaching of residents and midlevel practitioner trainees. Requirements include a California nursing license and graduation from an approved Family Nurse Practitioner Training Program. Eligibility for faculty appointment with UC Davis Family Nurse Practitioner Program and Stanford Physician's Assistant Training Program is required. Salary range is $16,512-$20,160 annually, depending on qualifications. The County of Kern is an Equal Opportunity Employer. For further information, send curriculum vitae to Department of Family Practice, Kern Medical Center, 1830 Flower Street, Bakersfield, CA 93305.

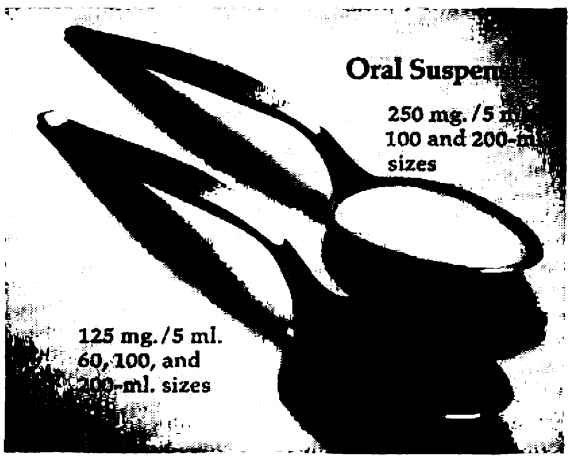
PRACTICE FOR SALE

OB/GYN PRACTICE—RELOCATING. A 20-year, fully equipped, solo practice in San Francisco located in 80-man professional bldg., close to 5 hospitals; will stay to introduce; terms negotiable. Call after 6 PM (415) 761-1698.

(Continued on Page 28)

easy to take





Keflex®
cephalexin

Lilly

Additional information available to the profession on request.
Eli Lilly and Company
Indianapolis, Indiana 46206

500738

(Continued from Page 26)

PRACTICE FOR SALE

ANAHEIM, CALIFORNIA. GENERAL OPHTHALMOLOGICAL PRACTICE. Reasonable terms. Write P.O. Box 244, Stanton, CA 90680.

RADIOLOGY PRACTICE—sole practitioner, heart of Beverly Hills in medical building. Fully equipped office. Has potential. Contact Mr. Miller (213) 278-7874.

GENERAL PRACTITIONER retiring Dec. 31, 1978, Fremont-San Francisco area. Take over equipment. Will introduce to practice. Good reciprocal coverage, excellent hospital. First class opportunity. 2147 Mowry Ave. Suite D3, Fremont, CA 94536. Telephone: (415) 797-6560.

PRACTICE AVAILABLE

FAMILY PRACTICE with medical lab interest available due to serious illness. Excellent staff and facilities located in Fresno, California. Minimum investment required as we desire to find an individual to continue the practice versus liquidation. This is an excellent opportunity for an individual to step in to a highly rewarding practice without the time and expense of establishing a new practice. Contact B. Horton, 1208 W. Shaw, Fresno, CA 93711, (209) 225-0742.

MEDICAL PRACTICES

BUYING or SELLING a medical practice contact California Professional Practices, 1411 Kenneth Road, Glendale, CA 91201. (213) 246-7491 Eve. (213) 355-3983.

PRACTICE FOR LEASE OR SALE

OFFICE FULLY EQUIPPED. 500 sq. ft., close to Hoag Hospital, lease or sale, general interest desired, available October 1. Reasonable lease. William Stein, MD, FACP, 351 Hospital Road, Newport Beach, CA 92663.

LABORATORY FOR SALE

FOR SALE. Established cytology specialty laboratory. Physician-patient oriented. Excellent opportunity for pathologist or qualified physician-cytopathologist. Reply to Box 6008, Western Journal of Medicine, 731 Market St., San Francisco, CA 94103.

FOR LEASE OR SALE

HOME-OFFICE—High desert. Located on private airport. Clean air, sunshine. Taxiway. Nose-hanger. Unique lifestyle for pilot physician. Write or call: Charles Bigman, MD, 57610 Crestview Dr., Yucca Valley, CA 92284. (714) 365-3654.

VACATION HOUSE EXCHANGE

ENGLISH FAMILY DOCTOR 34, wife and son, age 6, living in Devon, South West England, edge of Dartmoor, 3 hours London, 2½ hours Stratford, seek holiday exchange with Californian family. May-September 1979. Exchange house, cars for 4 weeks or reciprocal hospitality 2 weeks—Approx. Reply Dr. P. Stanley, Meadow House, Bovey Tracey, Devon, England.

HOUSE FOR SALE

LAKEVIEW. 3 Br, 3 Ba, 2,750 sq. ft. exec. home on 5 acs. Pines & oaks. Golfing, boating, clubhouse. $158,500.

GOLF COURSE. 3 Br, 2 Ba new home. Lakeview. Country club amenities. $89,500.

COOLIDGE REAL ESTATE
1212 High St., Suite 201
Auburn, CA 95603
(916) 885-1945

VACATION RENTALS

RELAX IN HAWAIIAN ATMOSPHERE, Hanalei, Kauai. Vacation beach home for only $295/weekly and $1,100/monthly. Old Hawaiian atmosphere, away from crowded beaches. Sleeps 11. For details, pictures and information, write James R. Christiansen, 1216 State St., Santa Barbara, CA 93101.

CORONADO, CALIF. Luxurious decorator furnished oceanfront 1 br condo w/superb view. Perfect year-round climate, golf, tennis, swimming, spa, boating, deep-sea fishing. 15 min. from San Diego. Avail immed. (213) 277-6659.

OFFICES FOR LEASE OR RENT

SAN LEANDRO—Medical-dental suite, 1,385 sq. ft., three operatories plus lab and darkroom, single story building. Excellent opportunity in really great community. Call owner/agent (415) 352-3201.

VISALIA, CALIFORNIA. New medical-dental professional complex in an expanding prestige area. Suburban Professional Park, 70 cents per sq. ft. Call (209) 732-3977 or (209) 732-7850.

FOR RENT—Newest and largest professional building in south San Diego community of Imperial Beach, Calif.; suites to suit tenant; excellent opportunity for general practice, internal medicine, gynecology, general surgery, dermatology and ophthalmology; J. E Geis, DDS, (714) 424-3931.

REAL ESTATE INVESTMENTS

SMALL INVESTMENT FIRM with proven track record, we cater to physicians. Apts., office bldgs., shop cntrs, ranches, and farms thruout Western U.S. Write Gayle Tuttle, 3620 Long Beach Blvd., Ste A-2, Long Beach, CA 90807, phone (213) 595-1987.

MEDICAL BUILDING FOR LEASE OR SALE

DOCTOR'S WIDOW MUST SELL 9 room medical building on 2 lots in lovely rural town of Kernville, on the Kern River in Central Calif. Full equipment may be included. Now rented at $1,250 mo. Asking $118,000. Ask for Ms. Wilson, (714) 379-3684.

FOR LEASE OR RENT

MEDICAL BLDG. FOR LEASE: Air conditioned 1,500 sq ft. Ample parking. S.E. Los Angeles area. Dr. Frank A. Bowman, 5714 Clara St., Bell Gardens, CA 90201. Phone (213) 773-3731.

MEDICAL BUILDING
COVINA, CALIFORNIA

1st Bldg. 3,925 sq. ft. Medical Offices. 2nd Bldg. 1,835 sq. ft. Dental Offices. Excellent condition, A1 location. All leased except one medical suite of 1,900 sq. ft. set aside for user. X-ray, lab and surgical rooms, asking price $365,000. **RADER REALTY INC., 213-331-0521, 384 E. Rowland, Covina, CA 91723.**

SALE—MEDICAL EPONYMS

COMPREHENSIVE HANDBOOK OF MEDICAL EPONYMS. Over 1,000 carefully researched entries. Valuable reference source while studying for FLEX, Boards, ECFMB or VQE. $12.50 postpaid. Micron Publishing Company, P.O. Box 66301, (4028 Qtr. Grandview), Los Angeles, CA 90066.

"My malpractice bill from the Travelers used to really take the joy out of delivering babies..."

"I'm an obstetrician here in Los Angeles and while I'm careful in my practice, I know that my malpractice insurance protects my professional reputation and all those things I've earned over the years for me and my family.

I chose my new professional liability company with the same care I use in selecting treatment for my patients. I selected Physicians and Surgeons because I admired their independence and the fresh new way they look at insurance problems and claims handling. What's more they saved me money and that's refreshing."

Howard Ragland, MD

To get your own refreshing look at what Physicians and Surgeons can do for you call or write Michael D. Turpel, Director of marketing today.

PHYSICIANS AND SURGEONS
INSURANCE EXCHANGE OF CALIFORNIA
221 East Walnut Street, Suite 216, Pasadena, California 91101, Telephone (213) 795-0434

The above message is not an offer to sell insurance or Contribution Certificates. Such an offer is only made by means of the Information Brochure for Prospective Policyholders which is available from Physicians and Surgeons Insurance Exchange

Southern California School of Medicine, Los Angeles; and Paul Peter Rosen, MD, Attending Pathologist, Memorial Hospital for Cancer and Allied Diseases, Memorial Sloan-Kettering Cancer Center, New York; Assistant Professor of Pathology, Cornell University School of Medicine, New York. Appleton-Century-Crofts, 292 Madison Ave., New York City (10017), 1978. 418 pages, $32.50.

RECENT ADVANCES IN GERIATRIC MEDICINE—Number 1—Edited by Bernard Isaacs, MD, FRCP (Glas), MRCP (Edin), Charles Hayward Professor of Geriatric Medicine, University of Birmingham, England. Churchill Livingstone—Medical Division of Longman Inc., 19 West 44th St., New York City (10036), 1978. 172 pages, $25.00.

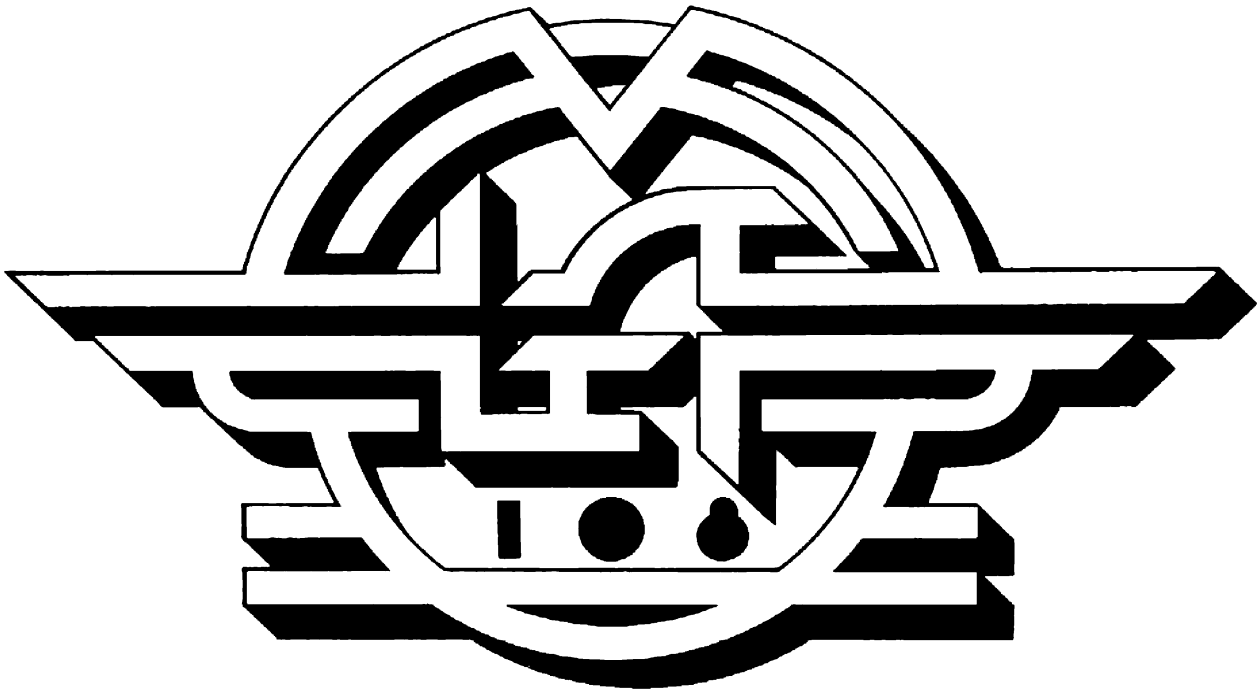
RESPECTFUL TREATMENT—The Human Side of Medical Care—Martin R. Lipp, MD. Assistant Clinical Professor, Department of Psychiatry and Ambulatory and Community Medicine, University of California, San Francisco; Staff Physician, Emergency Department, Permanente Medical Group, Hayward, California. Medical Department, Harper & Row, Publishers, 2350 Virginia Ave., Hagerstown, MD (21740), 1977. 232 pages, including index, $11.50 (Paperback).

REVIEW OF MEDICAL PHARMACOLOGY—Sixth Edition—Frederick H. Meyers, MD, Professor of Pharmacology; Ernest Jawetz, MD, PhD, Professor of Microbiology and Medicine, and Alan Goldfien, MD, Professor of Medicine, Departments of Medicine and Obstetrics and Cardiovascular Research Institute, School of Medicine, University of California, San Francisco. Lange Medical Publications, Drawer L, Los Altos, CA (94022), 1978. 762 pages, $14.50.

STRONG MEDICINE—History of Healing on the Northwest Coast—Robert E. McKechnie II, MD, Vancouver, BC. Exclusive Distributor: ISBS, Inc., P.O. Box 555, Forest Grove, OR (97116), 1972. 193 pages, $8.95 (Cloth), $4.95 (Paperback).

TEXTBOOK OF SURGERY—Fourth Edition—Edited by David A. Macfarlane, BSc, MCh, FRCS, Consultant Surgeon, Westminster Hospital Group, London; Examiner in Surgery, Court of Examiners, Royal College of Surgeons of England; Honorary Senior Lecturer, Westminster Hospital Medical School; Teacher of Surgery, University of London; Hunterian Professor, Royal College of Surgeons of England; and Lewis P. Thomas, BSc, MCh, FRCS, Consultant Surgeon, Royal Gwent Hospital, Newport; Formerly Senior Lecturer in Surgery, Welsh National School of Medicine, Cardiff. Churchill Livingstone/Medical Division of Longman Inc., 19 West 44th St., New York City (10036), 1977. 787 pages, $21.50.

VISIONETICS—The Holistic Way to Better Eyesight—Lisette Scholl, with John Selby as Consultant. Doubleday & Company, Inc., 245 Park Avenue, New York City (10017), 1978. 222 pages, $4.95 (Paperback).



108TH ANNUAL SESSION
CALIFORNIA MEDICAL ASSOCIATION

Clinical Conferences
Asthma 1979
Glaucoma Update
Microsurgery & Flaps
Rational Transfusion Therapy
Running Maladies & the Diabetic Foot
The Paralyzed Face
Clinical Obstetrics & Gynecology
Thyroid Cancer
Venous Thrombosis & Pulmonary Embolism
Adolescent Medicine
Chronic Pain
Anesthesia & the Cardiac Surgical Patient
What to Do & When in Radiology
Stroke, Seizure & Coma
Malignant Melanoma

Social Issues Affecting Your Clinical Practice
The Foreground & Horizon of Medical Practice in California
Stretching the Medical Dollar—Is More for Less Possible?
Is There Life After Medical School
Holistic & Humanistic Medicine
Drug Abuse: The Distorter of Disease
Dying
The Impaired Physician
VD Task Force Reports
Stress-Related Illness
CMA Accreditation Program

And . . .
CMA House of Delegates
14 Specialty Society Affiliated Meetings
Scientific & Commercial Exhibits including CMA Services Center
CMA Auxiliary Convention

All scientific programs are approved for Category I Credit in the CMA Certification Program

Watch for complete program and hotel reservation form in the December issue, *The Western Journal of Medicine*

MARCH 9-14, 1979 LOS ANGELES

Before prescribing, please consult complete product information, a summary of which follows:

The effectiveness of Valium (diazepam) in long-term use, that is, more than 4 months, has not been assessed by systematic clinical studies. The physician should periodically reassess the usefulness of the drug for the individual patient.

Contraindications: Tablets in children under 6 months of age; known hypersensitivity; acute narrow angle glaucoma; may be used in patients with open angle glaucoma who are receiving appropriate therapy.

Warnings: As with most CNS-acting drugs, caution against hazardous occupations requiring complete mental alertness (*e.g.*, operating machinery, driving). Withdrawal symptoms (similar to those with barbiturates, alcohol) have occurred following abrupt discontinuance (convulsions, tremor, abdominal muscle cramps, vomiting, sweating). Keep addiction-prone individuals (drug addicts or alcoholics) under careful surveillance because of predisposition to habituation dependence.

Usage in Pregnancy: **Use of minor tranquilizers during first trimester should almost always be avoided because of increased risk of congenital malformations, as suggested in several studies. Consider possibility of pregnancy when instituting therapy; advise patients to discuss therapy if they intend to or do become pregnant.**

ORAL: Advise patients against simultaneous ingestion of alcohol and other CNS depressants.

Not of value in treatment of psychotic patients; should not be employed in lieu of appropriate treatment. When using oral form adjunctively in convulsive disorders, possibility of increase in frequency and or severity of grand mal seizures may require increase in dosage of standard anticonvulsant medication; abrupt withdrawal in such cases may be associated with temporary increase in frequency and or severity of seizures.

INJECTABLE: *To reduce the possibility of venous thrombosis, phlebitis, local irritation, swelling, and, rarely, vascular impairment when used I.V.: inject slowly, taking at least one minute for each 5 mg (1 ml) given; do not use small veins, i.e., dorsum of hand or wrist; use extreme care to avoid intra-arterial administration or extravasation. Do not mix or dilute Valium with other solutions or drugs in syringe or infusion flask. If it is not feasible to administer Valium directly I.V., it may be injected slowly through the infusion tubing as close as possible to the vein insertion.*

Administer with extreme care to elderly, very ill, those with limited pulmonary reserve because of possibility of apnea and or cardiac arrest; concomitant use of barbiturates, alcohol or other CNS depressants increases depression with increased risk of apnea; have resuscitative facilities available. When used with narcotic analgesic eliminate or reduce narcotic dosage at least 1/3; administer in small increments. Should not be administered to patients in shock, coma, acute alcoholic intoxication with depression of vital signs.

Has precipitated tonic status epilepticus in patients treated for petit mal status or petit mal variant status.

Withdrawal symptoms (similar to those with barbiturates, alcohol) have occurred following abrupt discontinuance (convulsions, tremor, abdominal muscle cramps, vomiting, sweating). Keep addiction-prone individuals under careful surveillance because of predisposition to habituation dependence. Not recommended for OB use.

Efficacy safety not established in neonates (age 30 days or less); prolonged CNS depression observed. In children, give slowly (up to 0.25 mg/kg over 3 minutes) to avoid apnea or prolonged somnolence; can be repeated after 15 to 30 minutes. If no relief after third administration, appropriate adjunctive therapy is recommended.

Precautions: If combined with other psychotropics or anticonvulsants, carefully consider individual pharmacologic effects—particularly with known compounds which may potentiate action of Valium (diazepam) (*i.e.*, phenothiazines, narcotics, barbiturates, MAO inhibitors and antidepressants. Protective measures indicated in highly anxious patients with accompanying depression who may have suicidal tendencies. Observe usual precautions in impaired hepatic function; avoid accumulation in patients with compromised kidney function. Limit oral dosage to smallest effective amount in elderly and debilitated to preclude ataxia or oversedation (initially 2 to 2½ mg once or twice daily, increasing gradually as needed or tolerated).

INJECTABLE: Although promptly controlled, seizures may return; readminister if necessary; not recommended for long-term maintenance therapy. Laryngospasm, increased cough reflex are possible during peroral endoscopic procedures; use topical anesthetic, have necessary countermeasures available. Hypotension or muscular weakness possible, particularly when used with narcotics, barbiturates or alcohol. Use lower doses (2 to 5 mg) for elderly debilitated.

Adverse Reactions: Side effects most commonly reported were drowsiness, fatigue, ataxia. Infrequently encountered were confusion, constipation, depression, diplopia, dysarthria, headache, hypotension, incontinence, jaundice, changes in libido, nausea, changes in salivation, skin rash, slurred speech, tremor, urinary retention, vertigo, blurred vision. Paradoxical reactions such as acute hyperexcited states, anxiety, hallucinations, increased muscle spasticity, insomnia, rage, sleep disturbances and stimulation have been reported; should these occur, discontinue drug.

Because of isolated reports of neutropenia and jaundice, periodic blood counts, liver function tests advisable during long-term therapy. Minor changes in EEG patterns, usually low-voltage fast activity, have been observed in patients during and after Valium (diazepam) therapy and are of no known significance.

INJECTABLE: Venous thrombosis, phlebitis at injection site, hypoactivity, syncope, bradycardia, cardiovascular collapse, nystagmus, urticaria, hiccups, neutropenia.

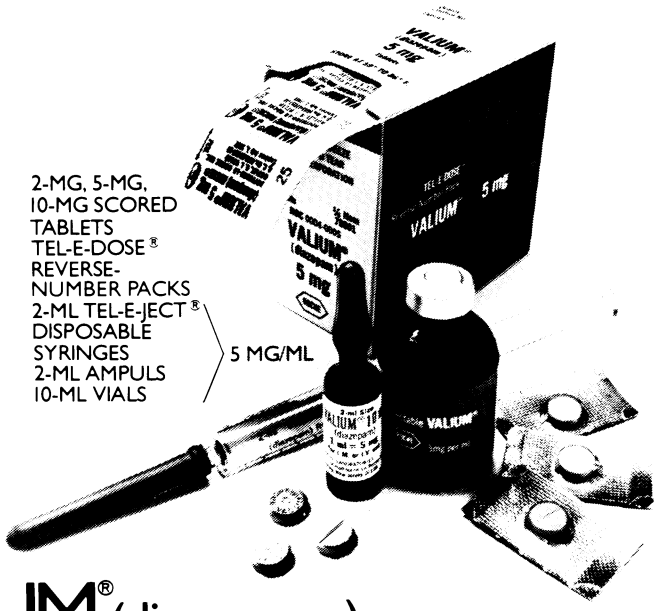
In peroral endoscopic procedures, coughing, depressed respiration, dyspnea, hyperventilation, laryngospasm, pain in throat or chest have been reported.

Management of Overdosage: Manifestations include somnolence, confusion, coma, diminished reflexes. Monitor respiration, pulse, blood pressure, employ general supportive measures, I.V. fluids, adequate airway. Use levarterenol or metaraminol for hypotension; caffeine and sodium benzoate for CNS-depressive effects. Dialysis is of limited value.

Supplied: Tablets, 2 mg, 5 mg and 10 mg; bottles of 100 and 500; Tel-E-Dose® (unit dose) packages of 100, available in trays of 4 reverse-numbered boxes of 25, and in boxes containing 10 strips of 10; Prescription Paks of 50, available singly and in trays of 10. Ampuls, 2 ml, boxes of 10; Vials, 10 ml, boxes of 1; Tel-E-Ject® (disposable syringes), 2 ml, boxes of 10. Each ml contains 5 mg diazepam, compounded with 40% propylene glycol, 10% ethyl alcohol, 5% sodium benzoate and benzoic acid as buffers, and 1.5% benzyl alcohol as preservative.

ROCHE

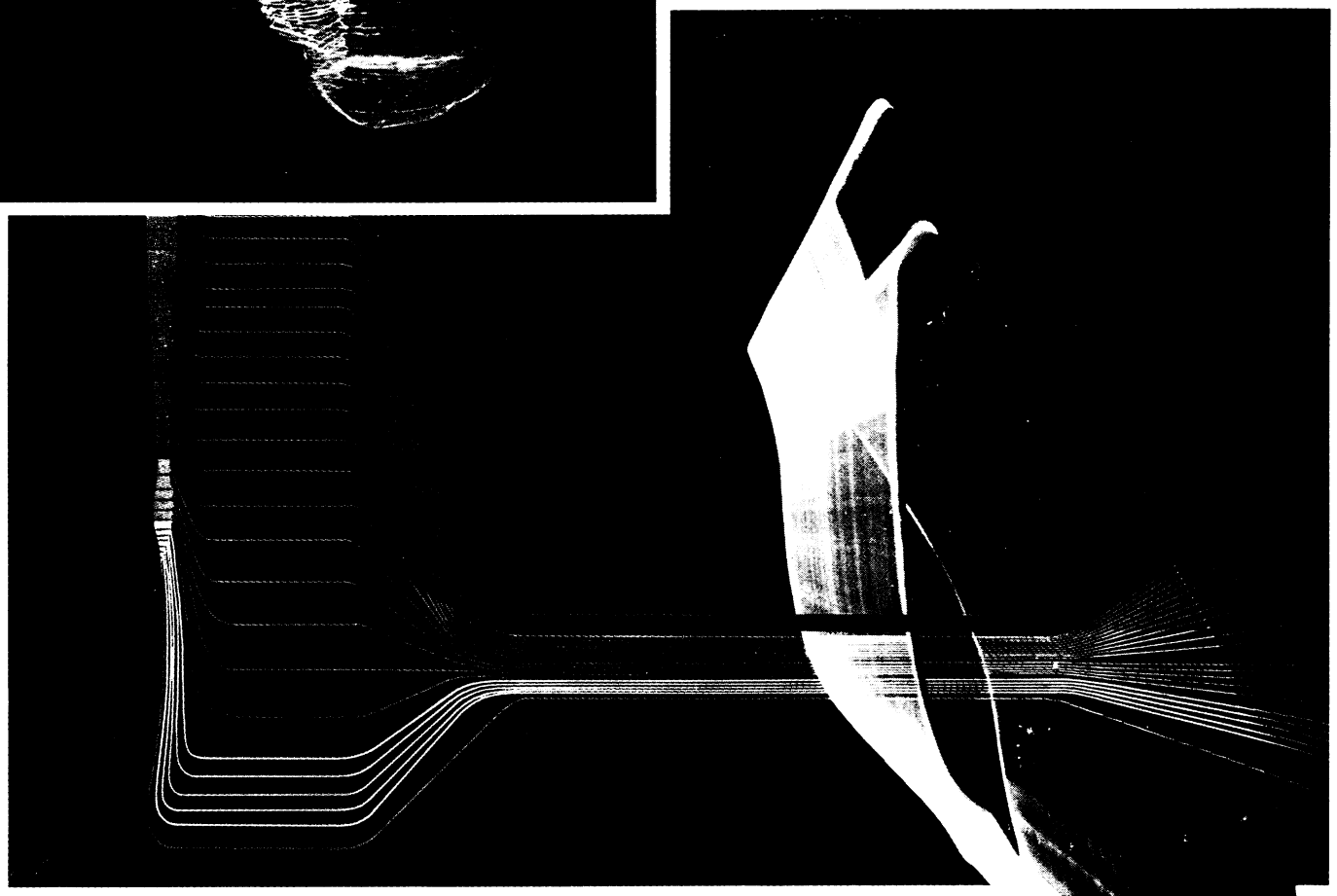
Roche Laboratories
Division of Hoffmann-La Roche Inc.
Nutley, New Jersey 07110



ONLY VALIUM® (diazepam) GIVES YOU THIS CHOICE OF DOSAGE FORMS AND FLEXIBILITY

PSYCHOTHERAPEUTIC

SKELETAL MUSCLE RELAXANT



ONLY VALIUM® (diazepam) IV©

HAS THESE TWO DISTINCT EFFECTS

Please see preceding page for a summary of product information.

ROCHE